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Attorney Docket No. 045956-0103  
Application No. 10/522,917

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Henri KLEIN *et al.*  
Title: AIR-CONDITIONER HOUSING  
Application No.: 10/522,917  
International Filing Date: 5/26/2003  
371(c) Date: 1/31/2005  
Examiner: John K. Ford  
Art Unit: 3744  
Confirmation Number: 4219

**PETITION UNDER 37 C.F.R. § 1.182 FOR EXPEDITED HANDLING OF**  
**PETITION UNDER 37 C.F.R. §1.313(c)(2)**  
**TO WITHDRAW APPLICATION FROM ISSUE**

Mail Stop PETITIONS  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicants respectfully request that the enclosed "PETITION UNDER 37 C.F.R. §1.313(c)(2) TO WITHDRAW APPLICATION FROM ISSUE" be handled on an expedited basis.

The expedited handling petition fee under 37 CFR § 1.17(f) of \$400.00 is being paid by credit card statement attached.

Refund Ref: 02/03/2009 0030066229

Credit Card Refund Total: \$400.00

VISA.....: XXXXXXXXXXXX5200

01/29/2009 SMOHAMME 00000106 10522917

01 FC:1462


400.00 OP

Adjustment date: 02/03/2009 CKHLOK  
01/29/2009 SMOHAMME 00000106 10522917  
01 FC:1462 -400.00 OP

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Respectfully submitted,

Date February 28, 2009

By 

FOLEY & LARDNER LLP  
Customer Number: 22428  
Telephone: (202) 672-5540  
Facsimile: (202) 672-5399

Paul D. Strain  
Attorney for Applicant  
Registration No. 47,369

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>1-30-09</u>		2 Serial/Patent # <u>10/522917</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time			\$						
	Notice of Appeal/Appeal			\$						
	Petition		1-28-09	\$ 400						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
<div style="border: 1px solid black; height: 40px; width: 100%; background-color: #f0f0f0;"></div>		7 TOTAL AMOUNT OF REFUND		\$ <u>400</u>						
		8 TO BE REFUNDED BY: <u>CC</u>								
10 REASON:		Treasury Check								
	Overpayment	Credit Deposit A/C #:								
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
		--								
	No Fee Due (Explanation):									
<u>1,182 dismissed as matf.</u>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Karen Creasy</u>		TITLE: <u>Petitions Examiner</u>								
SIGNATURE: <u>/Karen Creasy/</u>		PHONE: <u>2-3208</u>								
OFFICE: <u>Petitions</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>CKHCK</u>		DATE: <u>2/3/09</u>								

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*